



Mitt Romney  
Governor

Kerry Healey  
Lieutenant Governor

# *The Commonwealth of Massachusetts*

## *Department of Public Safety*

*One Ashburton Place, Room 1301*

*Boston, Massachusetts 02108-1618*

*Phone (617) 727-3200*

*Fax (617) 727-5732*

Robert C. Haas  
Secretary

Thomas G. Gatzunis, P.E.  
Commissioner

G

### CORI REQUEST FORM

The Department of Public Safety has been certified by the Criminal History Systems Board to access records of conviction and pending criminal case data for applicants for amusement device operator's licenses. As an applicant, I understand that a criminal record check will be conducted by the Department for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

### APPLICANT INFORMATION (PLEASE PRINT)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_-\_\_\_\_-\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED DPS EMPLOYEE